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Fill in this information to identify your cas	56:
United States Bankruptcy Court for the:	
SOUTHERN District of	NEW YORK
Case number (If known):	Chapter you are filing under:
	Chapter 7 ☐ Chapter 11
	Chapter 12 Chapter 13

U.S. BANKRUPTCY COURT

2019 MAR 21 A 10: 01

S.D. Of Gheck if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Irving government-issued picture First name identification (for example, First name your driver's license or passport). Middle name Middle name Montalvo Bring your picture identification to your meeting Last name Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Śr., Jr., II, III) 2. All other names you have used in the last 8 First name First name years Middle name Include your married or Middle name maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of - xx - 0489your Social Security XXX number or federal Individual Taxpayer $9 \times x - \times x - \underline{}$ Identification number $9 \times x - \times x - \underline{\ }$ (ITIN)

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Pebtor 1 Irving First Name Middle Na	Montalvo ame Last Name	Case number (if known)
	About Debtor 1:	About Debtor, 2 (Spouse Only in a Joint Case):
. Any business names and Employer Identification Numbers	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
(EIN) you have used in the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	<u>EIN</u> — — — — — — — — — — — — — — — — — — —	
		EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	1181 Walton Ave #3c	
	Number Street	Number Street
	Bronx NY 10452 City State ZIP Code	City State ZIP Code
	Bronx County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send
	any notices to you at this mailing address.	any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Cod
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1

Irving

Montalvo

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De	ebtor 1 Irving First Name Middle N		ntalvo Last Name			Case number (##	(nown)
			Edot Hame				
P	art 2: Tell the Court Abo	ut Your i	Bankruntev	Case			
7.	The chapter of the Bankruptcy Code you	Check of	one. (For a bri kruptcy (Form	ef description of e 2010)). Also, go t	each, see <i>Noti</i> to the top of p	ce Required by 11 age 1 and check tl	U.S.C. § 342(b) for Individuals Filing he appropriate box.
	are choosing to file under	Z Cha	apter 7			4 1	
		☐ Cha	apter 11				
		☐ Cha	apter 12				
		Cha	apter 13				
8.	How you will pay the fee	loca you sub	al court for m rself, you ma mitting your	nore details abou ay pay with cash payment on you	ut how you m n, cashier's c	nay pay. Typical heck, or money	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check
		with	a pre-printe	d address.			
		☐ I ne App	ed to pay the	ne fee in installi ndividuals to Pa	ments . If yo y The Filing	u choose this op Fee in Installme	otion, sign and attach the ents (Official Form 103A).
		By I less pay	aw, a judge in than 150% the fee in in:	may, but is not r of the official po stallments). If yo	required to, voverty line that ou choose th	waive your fee, a at applies to you is option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is a family size and you are unable to the sust fill out the Application to Have the with your petition.
9.	Have you filed for bankruptcy within the	☑ No	and the second s	-	allumani atrono one o dela para a gan ega	# 55.00 um etisco umutu iii pago dibah Jarah umutu anggazan	
	last 8 years?	Yes.	District	<u> </u>	When	MM / DD / YYYY	Case number
			District		When	WIWIT DDTTTTT	Case number
						MM / DD / YYYY	
			District		When	MM / DD / YYYY	Case number
4.6	A see a see to be a beauty of the see to be	laranishti.	BBbConstitutions and the second secon	VALUE AND TRANSPORTER TRANSPORTATION OF THE PROPERTY OF THE PR		***************************************	
10.	Are any bankruptcy cases pending or being	₩ No					
	filed by a spouse who is not filing this case with	Yes.	Debtor	· · · · · · · · · · · · · · · · · · ·			Relationship to you
	you, or by a business partner, or by an affiliate?		District		When	MM / DD / YYYY	Case number, if known
		V.	Debtor				Relationship to you
			District		When	MM / DD / YYYY	Case number, if known
11.	Do you rent your residence?	No. Yes.	Go to line 12 Has your lan residence? No. Go to	ndlord obtained an	ı eviction judgı	ment against you a	and do you want to stay in your
	ranger (1997) Sanggarang				ent About an F	- - - - - - - -	Against You (Form 101A) and file it with
				kruptcy petition.	יייי שטטער פון ב	.viction Juagment	Against You (Form 101A) and file it with

Irving

Debtor 1

Montalvo

btor 1 <u>Irving</u> First Name Middle Na	Montalvo	Case number (if known)	<u> </u>
First Name Middle Na	ime Last Name	The state of the s	
<u> </u>			
3: Report About Any	Businesses You Own as a	Sole Proprietor	
Are you a sole proprietor			
of any full- or part-time	No. Go to Part 4.		
ousiness?	Yes. Name and location of	f business	
A sole proprietorship is a			
pusiness you operate as an			<u>to a la companya di a company</u>
ndividual, and is not a	Name of business, if any	,	
separate legal entity such as a corporation, partnership, or			
LC.	Number Street		
f you have more than one			
sole proprietorship, use a			
separate sheet and attach it of this petition.			
o una pennon.	City	State ZIP Code	
	Check the appropriate	e box to describe your business:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Fillian .	ness (as defined in 11 U.S.C. § 101(27A))	
	Single Asset Real	l Estate (as defined in 11 U.S.C. § 101(51B))	
	Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))	
	Section with the section of the sect	er (as defined in 11 U.S.C. § 101(6))	
	None of the above		
debtor? For a definition of <i>small</i>	☑ No. I am not filing under C	Chapter 11.	
business debtor, see	☐ No. Lam filing under Char	oter 11, but I am NOT a small business debtor according to the de	finition in
11 U.S.C. § 101(51D).	the Bankruptcy Code.	And the decording to the de	minuon m
	Ves Lam filing under Char	oter 11 and I am a small business debtor according to the definitio	
	Bankruptcy Code.	the fir and rain a small business deptor according to the definition	n in the
<u> </u>			
t 4: Report if You Own	or Have Any Hazardoue Pr	operty or Any Property That Needs Immediate Attenti	• ÷
	or riave Any mazardous Fit	beilty of Any Property That Needs Immediate Attenti	ion
o you own or have any	☑ No		
roperty that poses or is lleged to pose a threat	☐ Yes. What is the hazard?		
f imminent and			
lentifiable hazard to			
ublic health or safety?			
r do you own any			
roperty that needs	If immediate attention	n is needed, why is it needed?	
nmediate attention?			
or example, do you own erishable goods, or livestock			
nat must be fed, or a building			
nat needs urgent repairs?			
	Where is the property	y?	
	The second secon	Number Street	
		City State ZIP C	Code
		Since /IPI	JUUG

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Dahtar 1	Irving	Montalyo	Casa mumahan uu	
Debtor 1	11 VIIIg	Manitaryo	Case number (if known)	the state of the s
	First Name	Middle Name Last Name		

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

YO	u	must ched	ck one:				
V	ı	received	a briefing	from	an	approved	credi

I I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am	not	required	to	receive	a	briefing	about
		unseling					

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not rec	quired	to	rece	ive	a bri	efing	abo	out
	lit coun								

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debte	or 1 Irvin		Montalvo E Last Name	Case no	umber (if known)		
	rirst Nan	ie Middie Nam	e Last Name				
Par	t 6: Answe	r These Que:	stions for Reporting Purpos	ses			
	What kind of you have?	debts do	16a. Are your debts prima as "incurred by an individu	rily consumer debts? Cons ual primarily for a personal, famil	<i>umer debt</i> s are de ly, or household p	efined in 11 U.S.C. § ourpose."	§ 101(8)
			Yes. Go to line 17.				
			16b. Are your debts prima	rily business debts? Busine			to obtain
			No. Go to line 16c. Yes. Go to line 17.				
			16c. State the type of debts yo	u owe that are not consumer de	bts or business d	ebts.	
		other work in the second contract of the seco					
	Are you filing Chapter 7?	under	No. I am not filing under C				
	Do you estim any exempt p excluded and			ter 7. Do you estimate that after es are paid that funds will be av	any exempt prop allable to distribut	erty is excluded and te to unsecured cred	d ditors?
	administrativ	e expenses funds will be	✓ No ☐ Yes				
(to unsecured	creditors?					
3	How many cr you estimate owe?		1-49 50-99 100-199	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,00	0
obcomenio (mo)			200-999		L		
. (How much do estimate you be worth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 milli \$50,000,001-\$100 milli \$100,000,001-\$500 m	on C	\$500,000,001-\$1 \$1,000,000,001-\$ \$10,000,000,001- More than \$50 bill	10 billion \$50 billion
				parameter and the second secon			
•	How much do estimate you to be?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000	\$1,000,001-\$10 millio \$10,000,001-\$50 milli \$50,000,001-\$100 mil	ion [\$500,000,001-\$1 \$1,000,000,001-\$ \$10,000,000,001-	10 billion \$50 billion
			\$500,001-\$1 million	\$100,000,001-\$500 m	nillion L	More than \$50 bill	lion
	1: 7: Sign B	elow	I have examined this petition, a	and I declare under penalty of pe	erjury that the info	ormation provided is	true and
			If I have chosen to file under C	hapter 7, I am aware that I may I understand the relief available	proceed, if eligible a under each char	e, under Chapter 7, oter, and I choose to	11,12, or 13 proceed
				nd I did not pay or agree to pay I and read the notice required by			elp me fill out
			I request relief in accordance v	with the chapter of title 11, Unite	d States Code, sp	pecified in this petition	on.
			with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519,	atement, concealing property, o suit in fines up to \$250,000, or in and \$5.71.	mprisonment for u	p to 20 years, or bo	
			Executed on MM / DD	19	Signature of Del	btor 2	

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or 1 Irving First Name Middle Name	Montalvo Last Name	Case	number (if known)	
your attorney, if you are resented by one ou are not represented	I, the attorney for the debtor(s) named in the to proceed under Chapter 7, 11, 12, or 13 available under each chapter for which the the notice required by 11 U.S.C. § 342(b) a knowledge after an inquiry that the informa	of title 11, United 5 person is eligible. and, in a case in w	States Code, and I also certify the hich § 707(b)(4)	d have explained the relief nat I have delivered to the debtor(s))(D) applies, certify that I have no
an attorney, you do not ed to file this page.	×			
	* <u> </u>		Date	
	Signature of Attorney for Debtor		1	MM / DD /YYYY
	Printed name			
	Contract Harris			
	Firm name			
			a d	
	Number Street			
		-	-	
	City		State	ZIP Code
	Out the bound		Empil odd	
	Contact phone	-	Email address	
	Bar number		State	 Supplied to the supplied of the supplied to the s

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Debtor 1	Irving First Name Middle Name	Montalvo Last Name	Case	number (if known)	
					- A Particular Communication C
bankrup attorney		The law allows you, as an should understand that nuthernselves successfully consequences, you are s	nany people find it ext . Because bankruptcy i	remely difficult to repre has long-term financial	sent
an attorr	e represented by ney, you do not file this page.	To be successful, you must technical, and a mistake or in dismissed because you did hearing, or cooperate with the firm if your case is selected to case, or you may lose protect.	naction may affect your rig not file a required docume ne court, case trustee, U.S for audit. If that happens,	ghts. For example, your ca int, pay a fee on time, atte s. trustee, bankruptcy adm you could lose your right t	ise may be nd a meeting or inistrator, or audit
		You must list all your proper court. Even if you plan to pay in your schedules. If you do property or properly claim it also deny you a discharge or case, such as destroying or cases are randomly audited. Bankruptcy fraud is a serie	y a particular debt outside not list a debt, the debt m as exempt, you may not b f all your debts if you do s hiding property, falsifying to determine if debtors ha	of your bankruptcy, you r ay not be discharged. If you be able to keep the proper comething dishonest in you records, or lying. Individua we been accurate, truthful	nust list that debt ou do not list ty. The judge can ur bankruptcy al bankruptcy
		If you decide to file without a hired an attorney. The court successful, you must be fam Bankruptcy Procedure, and be familiar with any state ex	will not treat you different niliar with the United State the local rules of the court	ly because you are filing for some second to be some second to be seen to be seen as the form of the form of the form of the form of the second to be seen as the second to be second to be seen as the second to be sec	or yourself. To be ederal Rules of
		Are you aware that filing for consequences?	bankruptcy is a serious ac	ction with long-term financ	ial and legal
		□ No ✓ Yes			
		Are you aware that bankrup inaccurate or incomplete, you			tcy forms are
		☐ No ✓ Yes			
		Did you pay or agree to pay No	someone who is not an a	ttorney to help you fill out	your bankruptcy forms?
		Yes. Name of Person Attach Bankruptcy Po	etition Preparer's Notice, De	eclaration, and Signature (C	Official Form 119).
		By signing here, I acknowled have read and understood to attorney may cause me to knowledge to the state of t	this notice, and I am aware ose my rights or property i	e that filing a bankruptcy c	ase without an
		Signature of Debtor 1 Date 63/20/	G	Signature of Debtor 2	
		MM/ DD //YYY Contact phone 6463556858	Υ΄	MM / D	D / YYYY
		Cell phone		Cell phone	
		English days		Francis and description	

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ebtor 1	Irving		Montalvo
	First Name	Middle Name	Last Name
ebtor 2			
pouse, if filing)	First Name	Middle Name	Last Name
nited States	Bankruptcy Court fo	or the: SOUTHER District of	NEW YORK

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets		
		Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$ _ O
1b. Copy line 62, Total personal property, from Schedule A/B		\$ <u>1870</u>
1c. Copy line 63, Total of all property on Schedule A/B		\$_1870
Part 2: Summarize Your Liabilities		
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		Your liabilities Amount you owe \$ _0 \$ _0
зь. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		+ \$ <u>20495</u>
	Your total liabilities	\$ 20495
Part 3: Summarize Your Income and Expenses		
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$ <u>1648</u>
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$ 1693

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Montalvo

Debtor 1

	Frist Name Micure Name Last Name		
Pa	Part 4: Answer These Questions for Administrative and Statistical Records		
6.	3. Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this form	n to the court with your other	schedules.
7.	7. What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an incidential family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes.	dividual primarily for a persons. 28 U.S.C. § 159.	nal,
	Your debts are not primarily consumer debts. You have nothing to report on this part of this form to the court with your other schedules.	the form. Check this box an	d submit
8.	 From the Statement of Your Current Monthly Income: Copy your total current monthly income. Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 	ne from Official	\$ <u>1648</u>
9.	9. Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :		
	From Part 4 on Schedule E/F, copy the following:	Total claim	
	9a. Domestic support obligations (Copy line 6a.)	\$ <u>0</u>	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u> </u>	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0	
	9d. Student loans. (Copy line 6f.)	\$	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$ <u> </u>	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0	
	9g. Total. Add lines 9a through 9f.	\$ <u>0</u>	

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Debtor 1	Irving		Montalvo			
	First Name	Middle Name	Last Name			
Debtor 2	1					
Spouse, if filing	First Name	Middle Name	Last Name	-		
			. NEW VODE			
Inited States	Bankruptcy Court fo	r the SOUTHER Distric				

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

sattaning	st in any residence, building, land, or similar prope	erty?	
No. Go to Part 2.			
Yes. Where is the property?			
1.1.	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Street address, if available, or other description	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of th portion you own?
	· 🔲 Land	\$	\$
City State ZIP Code	☐ Investment property ☐ Timeshare	Describe the nature of interest (such as fee	
Only Challe Ell Code	Other	the entireties, or a life	
	Who has an interest in the property? Check one.		
County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co	mmunity property
If you own or have more than one, list here:	Other information you wish to add about this it property identification number:	em, such as local	
1.2.	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured old the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D</i>
Street address, if available, or other description	☐ Condominium or cooperative☐ Manufactured or mobile home	Current value of the entire property?	Current value of t portion you own?
	☐ Land	\$	\$
City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
	Debtor 1 only Debtor 2 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	

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Case number (if known)

Montalvo

Irving

Debtor 1

	First Name N	liddie Name	Lasi Name			
1.3.				What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Street address, if avail	able, or other desc	cription	Duplex or multi-unit building Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
				Manufactured or mobile home	\$	\$
				Land Investment property	· · · · · · · · · · · · · · · · · · ·	
	City	State	ZIP Code	Timeshare	Describe the nature of	
	* .			☐ Other	interest (such as fee the entireties, or a life	e estate), if known.
				Who has an interest in the property? Check one.		
				Debtor 1 only		
	County			Debtor 2 only	<u> </u>	
				Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
				At least one of the debtors and another	(see instructions)	
				Other information you wish to add about this ite property identification number:		
2. Add t	he dollar value of ti	ne portion you	own for a	ll of your entries from Part 1, including any entrie	s for pages	\$ <u>0</u>
you h	nave attached for Pa	art 1. Write that	number l	here.	7	
-			***************************************			
	_					
Part 2:	Describe You	ır Vehicles				
Do you	own lease or have	legal or equital	hle intere	st in any vehicles, whether they are registered or	not? Include any vehicle	S
you own	that someone else d	rives. If you leas	se a vehicl	e, also report it on Schedule G: Executory Contracts	and Unexpired Leases.	
and the same of	, vans, trucks, tract	ors, sport utility	y vehicles	s, motorcycles		
Z N						
L	es					700 PM 100 PM 10
3.1.	Make:			Who has an interest in the property? Check one.	Do not deduct secured cl	
3,1,	Model:			Debtor 1 only	the amount of any secure Creditors Who Have Clai	ed claims on Schedule D: ms Secured by Property.
			···	Debtor 2 only		
	Year:		_	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate milea	ge:		At least one of the debtors and another		
	Other information:			Charle 16 this is somewhile avenue to (222	\$	\$
				☐ Check if this is community property (see instructions)		
If you	own or have more t	han one, describ	oe here:			
3.2.	Make:			Who has an interest in the property? Check one.	Do not deduct secured c	aims or exemptions. Put
J.2.	Model:			Debtor 1 only	the amount of any secure Creditors Who Have Clai	ed claims on Schedule D: ms Secured by Property.
	Year:	 		Debtor 2 only	Current value of the	A PROPERTY OF STREET
				Debtor 1 and Debtor 2 only	entire property?	portion you own?
-	Approximate milea	ye.		At least one of the debtors and another		
	Other information:	wyanakowa na namawa wa mana na mana a ka a shiniila		☐ Check if this is community property (see	\$	\$
	e de la companya de l			instructions)		
	I					
1						
	<u> </u>					

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Case number (if known)

Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 3.4 the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☑ No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.1. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.2. Make: the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 1 only Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Other information: At least one of the debtors and another Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Irving

First Name

Middle Nam

Debtor 1

Montalvo

Last Name

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Debtor 1

Irving

Montalvo

Case number (if known

Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware \$ 825 Yes. Describe...... Furniture - Residence 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No \$ 515 Yes. Describe...... Electronics - Residence 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles Z No Yes. Describe...... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No No Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe...... 11 Clothes Examples: Everyday clothes, furs, teather coats, designer wear, shoes, accessories □ No \$ 480 Yes. Describe...... Clothes - Residence 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, Z No Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses 1 No Yes. Describe...... 14. Any other personal and household Items you did not already list, including any health aids you did not list Yes. Give specific 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 1820 for Part 3. Write that number here

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Debtor 1

Irving

Montalvo

Last Name

Case number (if known)

t 4: Describe You	ır Financial Assets			
you own or have any l	egal or equitable interest in	any of the following?		Current value of the portion you own?
				Do not deduct secured cl or exemptions.
Cash Ex <i>amples:</i> Money you h	nave in your wallet, in your ho	me, in a safe deposit box, and on hand	d when you file vour petition	
	ave in your waner, in your no	mo, m a daid dopodi don, and on hand		
1 No 1 Yes			On the	
# (C)			Cash:	5
eposits of money Examples: Checking, se and other si	avings, or other financial accomilar institutions. If you have	ounts; certificates of deposit; shares in multiple accounts with the same institut	credit unions, brokerage house tion, list each.	98 ,
No				
1 Yes		Institution name:		
		Bank Account - Bank Account		\$ 50
	17.1. Checking account:	Dank Account - Dank Account		D SU
	17.2. Checking account:			\$
	17.3. Savings account:		· · · · · · · · · · · · · · · · · · ·	_ \$
	17.4. Savings account:			_ \$
	17.5. Certificates of deposit:		· · · · · · · · · · · · · · · · · · ·	_ \$
	17.6. Other financial account			\$
	17.7. Other financial account			\$
	17.8. Other financial account:			\$
	17.9. Other financial account			•
	17.9. Other infancial account			_ \$
onds, mutual funds,	or publicly traded stocks			
manus.	investment accounts with bro	kerage firms, money market accounts		
Z No J Yes	Institution or issuer name:			
	mondation of looder name.			ď
	-			
				<u> </u>
		porated and unincorporated busines	ses, including an interest in	
in LLC, partnership, a ズ	-		0/	
No Yes. Give specific	Name of entity:		% of ownership:	
LET US. GIVE SUBCOC				ð
information about			%	\$
			%	\$ \$

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Montalvo Irving Case number (if known) Debtor 1 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Mo No Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **Z** No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22 Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others A No Yes Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: ____ Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **Z** No Issuer name and description:

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Case number (if known)

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No No **Q** Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit V No Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **Z** No Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ₩ No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **Ø** No Yes. Give specific information Federal: about them, including whether you already filed the returns State and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information...... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else **1** No Yes. Give specific information.....

Irving

Middle Name

Debtor 1

Montalvo

Last Nam

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Case number (if known

31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **Z** No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value ... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. Z No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **√Z**I No Yes. Describe each claim..... 35. Any financial assets you did not already list Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 50 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims 38. Accounts receivable or commissions you already earned Z No Yes. Describe.... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices **☑** No Yes. Describe....

Irving

Debtor 1

Montalvo

Last Nam

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Debtor 1	Irving	Montalvo Case number (if known)		
	First Name	Middle Name Last Name		
40 Machin	erv. fixtures. e	quipment, supplies you use in business, and tools of your trade		
√Z No		, , , , , , , , , , , , , , , , , , , 		
ameniment.	P		- Anna and a second a second and a second and a second and a second and a second an	
Yes	s. Describe		\$	
41. <u>Inv</u> ento)rv			
Z No	·- ,			
EMORETH TOTAL	s. Describe		S	
		ips or joint ventures		
Z No				
Yes	s. Describe	Name of entity: % of owner	ship:	
		%	\$	
		%	\$	
		%	\$	
43 Custon	ner lists, mailin	g lists, or other compilations		
√ No				
☐ Yes	s. Do your lists	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	☐ No			
	Yes. Desc	ribe	_	
			\$	
	-		······································	
44. Any bu	siness-related	property you did not already list		
	s. Give specific			
	s. Give specific		<u> </u>	
			\$	
			\$	
			<u> </u>	
			\$	
			\$	
		for a second		
		of all of your entries from Part 5, including any entries for pages you have attached number here	→ \$	
101 7 41	it o. wiito tiiat i	10110		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Part 6:	l Describe A	ny Farm- and Commercial Fishing-Related Property You Own or Have an Inte	root In	
Part 6:	If you own o	r have an interest in farmland, list it in Part 1.	rest III.	
46 Do voi	ı own or have a	any legal or equitable interest in any farm- or commercial fishing-related property?		
	. Go to Part 7.			
	s. Go to line 47.			and a sufficient to the supplementary of the supple
			Current value	of the
			portion you o	wn?
			Do not deduct se or exemptions.	cured claims
47. Farm a	animals		or exemplions.	
		poultry, farm-raised fish		
₩ No		· · · · · · · · · · · · · · · · · · ·		
	s		etromen-materials (CC) (CC) (CC) (CC)	
L. T. I'G	-			
			<u> </u>	

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Case number (if known)

Montalvo

Irving

Debtor		Montalvo		Case number (if known)	
	First Name	Middle Name Last Name			
40 6 40	ps—either growin	n or hancastad			9004449
48. Cro		g or narvesteu			**************************************
MATERIAL	Yes. Give specific			,	
	information			Vanneumen van van van een lederek kirkele van van van de kerkele op tot op het stere kerkele van de kerkele va	\$
		pment, implements, machinery, fixture	s, and tools of trade		oorookelii kristaa
	No Yes		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE		
and the second					\$
so Ear	m and fiching cun	plies, chemicals, and feed	***************************************	MARAHIMININININININININININININININININININI	80 00 00 00 00 00 00 00 00 00 00 00 00 0
Ø		phoof offormoulo, and too			
	Yes			<u>чиничнинальный маринальний приня ходаль не гуде объящения переприня на гуде объяс</u>	Section 1
		NITS STOCKHOLOGO HERMANINININ ANNON SISSE SANDARINININ PROPERTIES SOON AND HERMANININ HERMANINININ HERMANININ HERMANININ HERMANININ HERMANINININ HERMANININININININININININININININININININI		untuman manya masa saadaa aa a	\$
		ercial fishing-related property you did	not already list		
	No Yes. Give specific	general control of the policy of the control of the policy			
	information				\$
52 Add	d the dollar value	of all of your entries from Part 6, includ	ding any entries for pa	ges you have attached	0
for	Part 6. Write that	number here		→	3
			W. (X.S.Su.) (Processing Association and Section 2015) and the Company of the Com	можения в постанования на принципания на принципания в постанования в постанования на постанования на постанов В постанования на постанования на постанования на постанования в постанования на постанования на постанования	
Part 7	A Describe	All Property You Own or Have	an Interest in Th	at You Did Not List Above	
		operty of any kind you did not already	list?		######################################
	. •	, country dub membership	CARDINET TO A CONTROL OF THE CONTROL	ACTIVISATION AND ACTIVISATION ACTIVISATION AND ACTIVISATION AND ACTIVISATION ACTIVI	
	Yes. Give specific			Statistical Control of the Control o	\$
	information				3
		This production of the contract of the contrac		жоныкатынданын такжет организациянык такжен күнүнүнүнүн каричен такжанын кенен кенен кенен кенен кенен кенен к	V
54. Ad	d the dollar value	of all of your entries from Part 7. Write	that number here		\$_0
	. '				
Part 8	2. Liet the T	otals of Each Part of this Forr	m		
raite	List the i	otals of Each Fart of this For			
55. Pa r	rt 1: Total real esta	ite, line 2			\$ <u>0</u>
56. Pa i	rt 2: Total vehicles	, line 5	\$	·	
57 Do	rt 2: Total navaona	l and household items, line 15	s 1820		***************************************
57. Pa i	rt 3. Total persona	and nousehold items, line 13	50	erroriano	
58. Pa i	rt 4: Total financia	l assets, line 36	\$		
59. Pa i	rt 5: Total busines	s-related property, line 45	\$ <u> </u>		
60. Pa i	rt 6: Total farm- ar	nd fishing-related property, line 52	\$ <u>0</u>		SM4466666666666666666666666666666666666
61∶ Pa i	rt 7: Total other pr	operty not listed, line 54	+ \$_0		
			1970		1970
62. To 1	tal personal prope	rty. Add lines 56 through 61	\$ 1870	Copy personal property total	+ \$ 1870
63. To	tal of all property	on Schedule A/B. Add line 55 + line 62		<u></u>	\$_1870

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Fill in this in	formation to id	lentify your case:				
Debtor 1	Irving First Name	Middle Name	Montalvo Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_		
United States	Bankruptcy Court	for the: SOUTHER District	of NEW YORK			
Case number (If known)						☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: **Identify the Property You Claim as Exempt** 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Specific laws that allow exemption Current value of the Amount of the exemption you claim Brief description of the property and line on Schedule A/B that lists this property portion you own Check only one box for each exemption. Copy the value from Schedule A/B Electronics Debtor & Creditor 282(1), Brief 5205(1)-(6); description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Clothes Brief Debtor & Creditor 282(1). **□** \$ \$ 480 description: 5205(1)-(6); 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Furniture Debtor & Creditor 282(1) \$ 825 description: 5205(1)-(6); 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

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Debtor 1

rving		Montalvo	
rst Name	Middle Name	Last Name	

Case number (if known)	

Part 2: Additional Page

Brief description Schedule A	on of the property and line /B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description:	Bank Account	\$ <u>50</u>		Debtor & Creditor 283(2);
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ \$00% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	_ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	- • • • • • • • • • • • • • • • • • • •	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	_ 🔲 \$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:		18 Per June 1	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
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Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	· · · · · · · · · · · · · · · · · · ·	\$	_ 🖳 s	
Line from Schedule A/B:	-		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

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Debor 1 Rivition Debor 2 Rivition Debor 3 Rivition Debor 4 Rivition Debor 4 Rivition Debor 5 Rivition Debor 6 Rivition Debor 6 Rivition Debor 7 Rivition Debor 6 Rivition Debor 7 Rivition Debor 7 Rivition Debor 7 Rivition Debor 7 Rivition Debor 8 Rivition Debor 9 Rivit	<u> </u>	A Company of the Comp	<u> </u>		
Case number	Fill in this information to identify your cas	e:	e e e e e e e e e e e e e e e e e e e		
Case number					
United States Beahouptey Coun for the:		lame Last Name	-		
United States Benkruptery Count for the:		Last Name			
Case number (n'exom) Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space in ended, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property?	(Spouse, if filling) First Name Middle N	Name Last Name			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as peablis, if two married people are filling together, both are equally responsible for supplying correct from secured in the speak of the secured copy the Additional Pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims accured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. 2. List all secured claims. 2. List all secured claims. 3. Secured claims. 3. Secured claims. 4. So of the date you file, the claim is: Check all that apply. Debor 1 only Debor 2 only Debor 1 only Debor 1 only Debor 1 only Debor 1 only Debor 2 only Debor 1 only Debor 2 only Debor 3 only Debor 3 only Debor 3 only Debor 4 only Debor 2 only Debor 2 only Debor 3 only Debor 4 only Deb	United States Bankruptcy Court for the:	District of			
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No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes, Fill in all of the information below.					
Yes. Fill in all of the information below.	generating.			las de manant en Abio formo	
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At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number		car loan)			
Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number			nic's lien)		
☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number	At least one of the debtors and another				
Date debt was incurred Last 4 digits of account number		Curon (more any a right to one of)			
		Last A digite of account number			
Add the dollar value of your entries in Column A on this page. Write that number here:					

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Fill in this	information to identify your case:		
Debtor 1	Irving	Montalvo	
	First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filir	ng) First Name Middle Name	Last Name	
	s Bankruptcy Court for the: SOUTHER D	istrict of NEW YORK	☐ Check if this is an
Case number (If known)	er		amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Par	1. 1: List All of Your PRIORITY Uns	secured Claims		
֖֖֓֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֓֞֓֞֞֞֞֞֓֞֞֞֞֓֞֞֞֞֞֞֞֞	Do any creditors have priority unsecured No. Go to Part 2. Yes.			
r	each claim listed, identify what type of claim nonpriority amounts. As much as possible, lis unsecured claims, fill out the Continuation Pa	If a creditor has more than one priority unsecured claim, list the creditor se it is. If a claim has both priority and nonpriority amounts, list that claim here st the claims in alphabetical order according to the creditor's name. If you h age of Part 1. If more than one creditor holds a particular claim, list the othe se the instructions for this form in the instruction booklet.)	and show both to ave more than to	vo priority
١.	V. Strategic Str	-Total claim		Nonpriority
			amount	amount
2.1	Priority Creditor's Name	Last 4 digits of account number \$	<u> </u>	. \$
		When was the debt incurred?		
	Number Street			
		As of the date you file, the claim is: Check all that apply.		
V 00000		Contingent		
	City State ZIP Cod	Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only	Domestic support obligations		
	At least one of the debtors and another			
	Check if this claim is for a community	debt Taxes and certain other debts you owe the government Claims for death or personal injury while you were		
	is the claim subject to offset?	intoxicated		
-	No	Other. Specify		
1	Yes			
2.2	The second secon	Last 4 digits of account number s	S	\$
	Priority Creditor's Name	When was the debt incurred?		e Period III
u		AAIIGH Mas the dest incrited .		
	Number Street	As of the date you file, the claim is: Check all that apply		
		Contingent		
	City State ZIP Coo			
-	Who incurred the debt? Check one.	☐ Disputed		
	Debtor 1 only	Town of PRIORITY unaccured claims		
	Debtor 2 only	Type of PRIORITY unsecured claim:		
-	Debtor 1 and Debtor 2 only	Domestic support obligations		
	☐ At least one of the debtors and another	Taxes and certain other debts you owe the government		
*	☐ Check if this claim is for a community	debt Claims for death or personal injury while you were intoxicated		
	Is the claim subject to offset?	Other Specify		
	□ No			
	☐ Ves			

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Debtor 1

Irving First Name

Montalvo

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Case number (if known)

Pai	14: Your PRIORITY Unsecured Claims	- Continuation Page	
Afte	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority Nonpriority amount amount
]		Last 4 digits of account number \$	\$\$
7	Priority Creditor's Name		
	Number Street	When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	City State ZIP Code	☐ Unliquidated☐ Disputed☐	
	Who incurred the debt? Check one.		
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations	
	At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were	
	☐ Check if this claim is for a community debt	intoxicated Other. Specify	
	Is the claim subject to offset?	_ Caron opening	
	□ No		
	Yes		
		Last 4 digits of account number	\$\$_
	Priority Creditor's Name		
	Number Street	When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	City State ZIP Code	☐ Unliquidated ☐ Disputed	
-	Who incurred the debt? Check one.		
	Debtor 1 only	Type of PRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations	
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were	
	☐ Check if this claim is for a community debt	intoxicated Other Specify	
	Is the claim subject to offset?		
	□ No		
	Yes		
	Priority Creditor's Name	Last 4 digits of account number	\$\$
	Priority Creditor's Name	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
		☐ Disputed	
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:	
	Debtor 1 only Debtor 2 only		
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government	
	At least one of the debtors and another	☐ Claims for death or personal injury while you were	
	☐ Check if this claim is for a community debt	intoxicated Other. Specify	
	Is the claim subject to offset?		and the second August Angele and the second and the
	□ No		
[☐ Yes		

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Debto	r1 Irving Montaivo	26 of 60 Case number (if known)	
	First Name Middle Name Last Name		
Part	2: List All of Your NONPRIORITY Unsecured Claims		
	o any creditors have nonpriority unsecured claims against you		
	$oxed{1}$ No. You have nothing to report in this part. Submit this form to th $oxed{1}$ Yes	e court with your other schedules.	
4 1	et all of your congrictly unsecured claims in the alphabetical	order of the creditor who holds each claim. If a creditor has	more than one
n Ir	onpriority unsecured claim, list the creditor separately for each clair acluded in Part 1. If more than one creditor holds a particular claim,	n. For each claim listed, identity what type of claim it is. Do not i list the other creditors in Part 3.If you have more than three non	priority unsecured
C	laims fill out the Continuation Page of Part 2.		
			Total claim
4.1	Capital One Bank Usa Na Nonpriority Creditor's Name	Last 4 digits of account number 7713	ş <u>5009</u>
	Po Box 30281	When was the debt incurred? <u>01/2016</u>	
	Number Street Salt Lake City UT 84130		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	☐ Unliquidated☐ Disputed☐	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☑ No	Other. Specify <u>Credit Card</u>	
	Yes		
4.2	Chase Card	Last 4 digits of account number	\$ <u>4025</u>
	Nonpriority Creditor's Name	When was the debt incurred? 01/2015	
	Po Box 15298 Number Street	As of the date you file, the claim is: Check all that apply.	
	Wilmington DE 19850 City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	is the claim subject to offset?	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card	
	☑ Yes	Cited Specify	
4.3		Last 4 digits of account number	
لـــــــا	Citicards Cbna Nonpriority Creditor's Name	When was the debt incurred? 04/2015	\$ 955
	Pob 6241		
	Number Street Sioux Falls SD 57117	- As of the date you file, the claim is: Check all that apply	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
e i gallina de la companya de la com	At least one of the debtors and another	Student loans	
***************************************	Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
1	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	

🛭 No

☐ Yes

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit Card

Debtor 1

Irving

.....

Montalvo

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Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

ter listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
Credit One Bank	Last 4 digits of account number 1600	\$ <u>999</u>
Nonpriority Creditor's Name Po Box 98875	When was the debt incurred? 04/2016	
Number Street Las Vegas NV 89193	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	□ Contingent □ Unliquidated	
Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Creit Card	
✓ No □ Yes		
Discover Finacial Service	Last 4 digits of account number 3774	\$ 3983
Nonpriority Creditor's Name Po Box 15316	When was the debt incurred? 09/2016	
Number Street Wilmington DE 19850	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify <u>Credit Card</u>	
✓ No ☐ Yes	Control Opening Street Carte	
First Premier Bank	Last 4 digits of account number	\$ <u>727</u>
Nonpriority Creditor's Name 601 S Minnesota Ave	When was the debt incurred?	
Number Street Sioux Falls SD 57104	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 only	Disputed Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Credit Card	

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Debtor 1

Irving

Montalvo

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Last Name

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim.
Total claims	6a. Domestic support obligations	6a.	s0
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$ <u>0</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$_0
	6e. Total. Add lines 6a through 6d.	6e.	s 0
			Total claim
Total claims	6f. Student loans	6f.	\$ <u>0</u>
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u> </u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u> </u>
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$ 20495
	6j. Total. Add lines 6f through 6i.	6j.	\$ 20495

Debt

or 1	Irving Montalvo		Pg 29 of 60	Case number (if known)	nber (if known)				
•	First Name Middle Name	Last Name							
rt 2:	Your NONPRIORITY	Unsecured Claims -	- Continuation Page						
	A STATE OF THE STA				The state of the state of	电 引电阻			

Fsb Blaze Credit Card Nonpriority Creditor's Name 500 E 60th Street Number Street Sioux Falls SD 57104 City State ZIP Code Who incurred the debt? Check one.	Total clain Last 4 digits of account number 0394 \$ 1499 When was the debt incurred? 01/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Nonpriority Creditor's Name 500 E 60th Street Number Street Sioux Falls SD 57104 City State ZIP Code Who incurred the debt? Check one.	When was the debt incurred? 01/2014 As of the date you file, the claim is: Check all that apply. Contingent
Nonpriority Creditor's Name 500 E 60th Street Number Street Sioux Falls SD 57104 City State ZIP Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply. Contingent
Sioux Falls SD 57104 City State ZIP Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply. Contingent
Sioux Falls SD 57104 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	☐ Contingent
Who incurred the debt? Check one. Debtor 1 only	· · · · · · · · · · · · · · · · · · ·
Who incurred the debt? Check one. Debtor 1 only	· · · · · · · · · · · · · · · · · · ·
Debtor 1 only	Uniquidated
Anna Carlos Carl	☐ Disputed
Debtor 2 only	
and Country a country	Type of NONPRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	☐ Student loans
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that
☐ Check if this claim is for a community debt	you did not report as priority claims
	Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset?	Other. Specify <u>Credit Ccard</u>
₹ No	
☐ Yes	
	Last 4 digits of account number 1214 \$ 3298
Synch/walmart	Lust 4 digita of doodant hamaer
Nonpriority Creditor's Name	When was the debt incurred?
Po Box 965024	
Number Street	As of the date you file, the claim is: Check all that apply.
Orlando FL 32896 City State ZIP Code	Contingent
City State ZIP Code	☐ Unliquidated
Who incurred the debt? Check one.	Disputed
Debtor 1 only	
Debtor 2 only	Type of NONPRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	Student loans
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that
☐ Check if this claim is for a community debt	you did not report as priority claims
	Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset?	Other Specify Charge Card
△ No	
Yes	
	Last 4 digits of account number
Nonpriority Creditor's Name	When was the debt incurred?
	When was the debt incurred?
Number Street	As of the date you file, the claim is: Check all that apply.
City State ZIP Code	Contingent
	☐ Unliquidated
Who incurred the debt? Check one.	☐ Disputed
Debtor 1 only	
☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:
☐ Debtor 1 and Debtor 2 only	☐ Student loans
☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that
☐ Check if this claim is for a community debt	you did not report as priority claims
	Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset?	Other Specify
□ No □ Yes	

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Debtor In	Irving		Montalvo		
505,01	First Name	Middle Name	Last Name		
Debtor 2 (Spouse If filir	ng) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court fo	or the:SOUTHEROistrict of	NEW YORK		
Case numb					

amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Check if this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes, Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

i	Person or	COMPANYW	th whom you	ave the contra	ct or lease			State w	hat the	contra	ct or le	ase is	for	415		W AND
	r er son or	Company W	idi wiloni you i			15.4				1.9		1		10	14	
2.1	ggj-catilar resum moreonium	5.000 mm														
	Name															
	Number	Street			<u>:</u>											
	City		State	ZIP Code												
2.2						20000000000000000000000000000000000000	47-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			**************************************				00000000000000000000000000000000000000		
***************************************	Name															
	Number	Street											, V			
	City		State	ZIP Code		2000 A CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONT			1 March 1981			e-july (+) (+ e-j-e) (+ i) = 000001		oranios (maltinianios (m.)	××ו••	
2.3						·										
	Name				-		1									
	Number	Street														
	City		State	ZIP Code			nacon most man	30000000000000000000000000000000000000						240-944		-
2.4	- <u> </u>															
	Name															
	Number	Street				:										
	City		State	ZIP Code			***************************************			X 20 0000			H-1000000000000000000000000000000000000			
2.5		· · · · · · · · · · · · · · · · · · ·														
	Name															
	Number	Street			-											
насае	City		State	ZIP Code			nere mades			AND	21754 (Chi 1888)	68847881:111	SECTION AND SECTION	STE 11 SX		and an analysis of the same of

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Case number (if known

Montalvo Last Name Debtor 1 **Additional Page if You Have More Contracts or Leases** What the contract or lease is for Person or company with whom you have the contract or lease 2.6 Name Number Street City ZIP Code State 2.7 Name Number Street City ZIP Code State 2.8 Name Number Street City State ZIP Code 2.9 Name Number Street City ZIP Code State 2.10 Name Number Street City State ZIP Code 2.11 Name Number Street City ZIP Code State 2.12 Name Number Street City ZIP Code State Name Number Street City State ZIP Code

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Fill in this	s information to i	dentify your case:	A description of the second				
D-144	Irving		Montalvo				
Debtor 1	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if f	iling) First Name	Middle Name	Last Name				
United Sta	ites Bankruptcy Cour	for the OUTHER District	of NEW YORK				
Case num	ber						
(If known)							Check if this is a amended filing
~ · ·	LE 400	S1.1					
	I Form 106						
		our Codebt					12/15
are filing t	ogether, both are er the entries in t	titles who are also liable equally responsible for he boxes on the left. Att swer every question.	supplying correct is	nformation. If mo	ore space	is needed, copy the Add	ditional Page, fill it out,
1. Do yo	ou have any code	otors? (If you are filing a j	oint case, do not list o	either spouse as a	a codebtor	.)	
□ N							
U Y			•	-	/O	to a second to second to second	ritorio e include
2. Withi	i n the last 8 years na, California, Idal	, have you lived in a con no, Louisiana, Nevada, Ne	nmunity property st w Mexico, Puerto Ric	co, Texas, Washir	(C <i>ommuni</i> ngton, and	y property states and terr Wisconsin.)	nones include
_	lo. Go to line 3.						
1	· • • • • • • • • • • • • • • • • • • •	e, former spouse, or lega	l equivalent live with y	you at the time?			
] No] You to which or	ommunity state or territory	did you live?	F	Fill in the n	ame and current address	of that person.
_	■ Yes. III Which Co	orialidatily state of territory	did you live:	· ·			
essential contraction of the con	Nome of your engue	e, former spouse, or legal equivale	ent .	<u> </u>			
	Manie or your spous	e, former spouse, or legal equivalent					
	Number Stre	eet		,			
	City	State		ZIP Code			
a In Co	•	your codebtors. Do not	include vour enous		if vour so	ouse is filing with you. L	ist the person
shov	vn in line 2 again	as a codebtor only if tha	it person is a guarai	ntor or cosigner.	. Make sui	e you have listed the cr	editor on
		orm 106D), Schedule E/edule G to fill out Colum		E/F), or Schedule	e G (Offici	al Form 106G). Use <i>Sch</i>	edule D,
\$48695	THE SALES OF THE S				Coll	imn 2: The creditor to wi	nom you owe the debt
Coll	umn 1: Your code	long				eck all schedules that app	98 - 186 - No. 1 - St
3.1					VIII.	sok all solitedules triat opp	
Nar	me					Schedule D, line	
						Schedule E/F, line	
Nui	mber Street					Schedule G, line	
City	<u>y</u>	S	late	ZIP Code			- MANAGEM - MANA
3.2	me				_ 0	Schedule D, line	
Na	me					Schedule E/F, line	TT .
Nu	mber Street					Schedule G, line	
Cit	Y		tate	ZIP Code			
3.3					0	Schedule D, line	
Na	ime				1 4 .	Schedule E/F, line	
Nu	ımber Street				_ 0	Schedule G, line	
1							

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Debtor 1 Irving Montalvo Case number (if known)_____

N	Additional Page to List More			
	Column 1: Your codebtor			Column 2. The creditor to whom you owe the deb
_]	Company of the compan	Mary Marines and Mary Mary Mary Mary Mary Mary Mary Mary	CARL CONTROL OF THE CARL	Check all schedules that apply:
_]				Schedule D, line
	Name			Schedule E/F, line
	Number Street			☐ Schedule G, line
_	City	State	ZIP Code	
.]				☐ Schedule D, line
	Name			☐ Schedule E/F, line
	Number Street		,	☐ Schedule G, line
_	City	State	ZIP Code	
-				☐ Schedule D, line
_	Name			Schedule E/F, line
	Number Street			☐ Schedule G, line
	Trained Greek			
	City	State	ZIP Code	
J	Name			Schedule D, line
	· · · · · · · · · · · · · · · · · · ·			Schedule E/F, line
	Number Street			Scriedule S, line
	City	State	ZIP Code	
_				
_	Name			Schedule D, line
				Schedule E/F, line
	Number Street			Guiedale G, line
	City	State	ZIP Code	
		The second secon	-	
	Name			☐ Schedule D, line
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	City	Side .		
	Name	· · · · · · · · · · · · · · · · · · ·		Schedule D, line
				Schedule E/F, line
	Number Street	· · · · · · · · · · · · · · · · · · ·		☐ Schedule G, line
			7ID Code	
J	City	State	ZIP Code	
_	Name			☐ Schedule D, line
	and the second of the second o			Schedule E/F, line
	Number Street			Schedule G, line
***************************************	City	State	ZIP Code	

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Fill in this information to identify	your case:					
Debter Irving	M	ontalvo				
Debtor 1 First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	SOUTHER District of NEV	W YORK				
Case number			Check if thi	s is:		
(If known)			🔲 🗖 An ame	nded filing		
				ement showing pos as of the following		chapter 13
Official Form 106I			MM / DD	7/ YYYY		
Schedule I: You	ır Income					12/15
Be as complete and accurate as posupplying correct information. If you fi you are separated and your spouseparate sheet to this form. On the	ou are married and not fil ise is not filing with you, top of any additional pa	ing jointly, and your spou do not include information	ise is living with yo n about vour spou	ou, include informations. se. If more space is	on about y needed, a	our spouse. Itach a
Fill in your employment						
information.		Debtor 1		Debtor 2 or non-	filing spot	180
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed		Employed Not employed		
Include part-time, seasonal, or self-employed work.	Occupation	RETIRED				
Occupation may include student or homemaker, if it applies.	•					
	Employer's name	none			<u></u>	<u> </u>
	Employer's address	none				
		Number Street		Number Street		
	•					
		City State	ZIP Code	City	State Z	IP Code
	How long employed the					
		<u> </u>				
Part 2: Give Details Abou	t Monthly Income					
Estimate monthly income as of spouse unless you are separated	f the date you file this for	m. If you have nothing to re	port for any line, wri	te \$0 in the space. Inc	clude your	non-filing
If you or your non-filing spouse h	ave more than one employ		for all employers fo	r that person on the li	nes	
			For Debtor 1	For Debtor 2 or non-filling spouse		
List monthly gross wages, sa deductions). If not paid monthly			\$ <u>1458</u>	\$		
3. Estimate and list monthly over	ertime pay.	3	+ <u>\$ 0 </u>	+ \$	_	
4. Calculate gross income. Add	line 2 + line 3.	4.	\$ 1458	\$		

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Debtor 1 Irving Montalvo Case number (if known) _____

	**************************************	For Debtor 1	For Debtor 2 or non-filling spouse			
Copy line 4 here	4.	\$ <u>1458</u>	\$			
5. List all payroll deductions:				abi-ossission and a second and		
5a. Tax, Medicare, and Social Security deductions	5a.	\$ <u>0</u>	\$	and a second		
5b. Mandatory contributions for retirement plans	5b.	\$ <u>0</u>	\$			
5c. Voluntary contributions for retirement plans	5c.	\$ 0				
5d. Required repayments of retirement fund loans	5d.	\$ <u>0</u>				
5e. Insurance	5e.	\$ 0				
5f. Domestic support obligations	5f.	\$ <u>0</u>	_ \$			
5g. Union dues	5g.	\$ <u>0</u>	<u> </u>			
5h. Other deductions. Specify:	5h.	+\$0	_ + \$			
6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ <u>0</u>				
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>1458</u>	<u> </u>			
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <u>0</u>	\$	6 M		
8b. Interest and dividends	8b.	\$ 0	\$			
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	∍nt	:	-			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ 0	\$	The second secon		
8d. Unemployment compensation	8d.	\$ <u>0</u>				
8e. Social Security	8e.	\$ <u>0</u>	<u> </u>			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$ 0	\$			
8g. Pension or retirement income	8g.	\$ <u>0</u>	, a			
8h. Other monthly income. Specify: food stamps	8h.	+\$ 190		<u> </u>		
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ 190	\$			
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	\$ <u>1648</u>	+	s <u>1648</u>		
11. State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives.	your o	J. dependents, your i	roommates, and other			
Do not include any amounts already included in lines 2-10 or amounts that are	not a	vailable to pay ex				
Specify:				1. + \$0		
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain	12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$\frac{1648}{2}\$					
				Combined monthly income		
13. Do you expect an increase or decrease within the year after you file this No.	torm					
Yes. Explain:						

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Fill in this information to identify your case:		
Debtor 1 Irving Montalvo	Oh and Millionia	
First Name Middle Name Last Name	Check if this is:	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	An amended filingA supplement showing postp	petition chanter 13
United States Bankruptcy Court for the: SOUTHER District of NEW YORK	expenses as of the following	
Case number(if known)	MM / DD / YYYY	
(I NIOWI)		
Official Form 106J		
Schedule J: Your Expenses		12/15
Be as complete and accurate as possible. If two married people are filing too information. If more space is needed, attach another sheet to this form. On the (if known). Answer every question.	gether, both are equally responsible for supplying the top of any additional pages, write your name	ing correct e and case number
Part 1: Describe Your Household		
1. Is this a joint case?		
No. Go to line 2.		
Yes. Does Debtor 2 live in a separate household?		
No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separa	ate Household of Debtor 2.	
2. Do you have dependents? No	endent's relationship to Dependent's	Does dependent live
Do not list Debtor 1 and Yes. Fill out this information for	tor 1 or Debtor 2 age	with you?
Debtor 2. each dependent		₩ No
names.		U Yes
		✓ No ☐ Yes
		☑ No
		Yes
	:	√ No
		☐ Yes
godina kaj distrikaj		Yes
3. Do your expenses include		And the second s
3. Do your expenses include expenses of people other than yourself and your dependents?		
yourself and your dependents.		
Part 2: Estimate Your Ongoing Monthly Expenses		
Estimate your expenses as of your bankruptcy filing date unless you are us expenses as of a date after the bankruptcy is filed. If this is a supplemental		
applicable date.		
Include expenses paid for with non-cash government assistance if you know	Variation	
such assistance and have included it on Schedule I: Your Income (Official F	Procedure Vision and Association (Inc.)	The state of the s
4. The rental or home ownership expenses for your residence. Include first any rent for the ground or lot.	mortgage payments and 4. \$\frac{1000}{}{}	dan
If not included in line 4:		
4a. Real estate taxes	4a. \$\frac{0}{0}	
4b. Property, homeowner's, or renter's insurance	4b. \$\frac{0}{0}	
4c. Home maintenance, repair, and upkeep expenses	4c. \$\frac{0}{0}	
4d. Homeowner's association or condominium dues	4d. \$	

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 Debtor 1
 Irving
 Montalvo
 Case number (if known)

 First Name
 Middle Name
 Last Name

		943	
			Your expenses
_	Additional mortgage payments for your residence, such as home equity loans	5.	\$ <u>0</u>
Э.	Auditional mortgage payments for your residence, such as notice equity loans	.	
6.	Utilities:		_{\$} 168
	6a. Electricity, heat, natural gas	6a.	\$ 0
	6b. Water, sewer, garbage collection	6b.	\$ 75
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ <u>0</u>
	6d. Other. Specify:	6d.	\$ 300
7.	Food and housekeeping supplies	7.	0
8.	Childcare and children's education costs	8.	D
9.	Clothing, laundry, and dry cleaning	9.	\$ 0
10.	Personal care products and services	10.	\$ 40
11.	Medical and dental expenses	11.	\$_0
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$_110
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ <u>0</u>
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$ <u>0</u>
	15b. Health insurance	15b.	\$ <u>0</u>
	15c. Vehicle insurance	15c.	\$ <u>0</u>
	15d. Other insurance. Specify:	15d.	\$ <u>0</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$ <u>0</u>
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$_0
	17b. Car payments for Vehicle 2	17b.	\$ <u> </u>
	17c. Other. Specify:	17c.	\$ <u>0</u>
	17d. Other. Specify:	17d.	\$ <u>0</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$ 0
19.	Other payments you make to support others who do not live with you.		. 0
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$_0
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$_0

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Debtor 1	Irving	Mont		Case	number (if known)		
	First Name	Middle Name	Last Name				
. Other.	Specify:				: 2	1. +\$ <u>0</u>	
Calcula	ate your monthl	y expenses.					West design and the second sec
22a. Ad	ld lines 4 through	h 21.			22:	a. \$_10	693
22b. Co	ppy line 22 (mon	thly expenses for D	ebtor 2), if any, from Official Fo	rm 106J-2	221	b. \$	
22c. Ad	ld line 22a and 2	2b. The result is yo	ur monthly expenses.		220	c. \$	
	te your monthly		inacura) from Cabadula !			\$ <u>1</u>	1648
			income) from Schedule I.		23		
23b. Co	opy your monthly	y expenses from lin	e 22c above.		23	b\$	1693
	•	nthly expenses from monthly net income	your monthly income.		23	sc. \$	-45
For exar	mple, do you ex	pect to finish paying	n your expenses within the year for your car loan within the year because of a modification to th	ar or do you expect y	our :		
☑ No.						***************************************	
Yes.	Explain her	e:					
					•		
	-						
						·	

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Fill in this in	formation to ide	entify your case:				
Debtor 1	Irving First Name	Middle Name	Montalvo Last Name			
Debtor 2 (Spouse, if filing)		Middle Name	Last Name	and the state of t		
United States	Bankruptcy Court f	or the: SOUTHER District	of NEW YORK			
(If known)						Check if this is amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
□ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have read that they are true and correct.	d the summary and schedules filed with this declaration and
No 12 QA	
* Your Mondo	×
Signature of Debton 1	Signature of Debtor 2
2/79/19	
Date	Date
MM/ DD // YYYY /	WINT DO 1 3111

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Debtor 1	Irving		Montalvo	Form 122
/CD(O) 1	First Name	Middle Name	Last Name	1. The
Debtor 2				waawa.
Spouse, if filing)	First Name	Middle Name	Last Name	2. The
Inited States	Bankruptcy Court f	or the: SOUTHER District	of NEW YORK	abu <i>Me</i>
ase number				3. The

 Check one box only as directed in this form and in Form 122A-1Supp:
1. There is no presumption of abuse.
2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 122A–2).
3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Abuse Order § 707(b)(2) (Official Form 122A-15dpp) with this form.	
Part 1: Calculate Your Current Monthly Income	
1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.	
☐ Married and your spouse is NOT filing with you. You and your spouse are:	
Living in the same household and are not legally separated. Fill out both Columns	A and B, lines 2-11.
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill ounder penalty of perjury that you and your spouse are legally separated under nonban spouse are living apart for reasons that do not include evading the Means Test require	kruptcy law that applies or that you and your
Fill in the average monthly income that you received from all sources, derived during the bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filling on September 15, the 6 August 31. If the amount of your monthly income varied during the 6 months, add the income for Fill in the result. Do not include any income amount more than once. For example, if both spoul income from that property in one column only. If you have nothing to report for any line, write \$	i-month period would be March 1 through or all 6 months and divide the total by 6: ses own the same rental property, put the
	blumn A Column B btor 1 Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). \$	\$
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	<u> </u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. \$.	<u> </u>
5. Net income from operating a business, profession, or farm	
Gross receipts (before all deductions) \$	
Ordinary and necessary operating expenses - \$ Copy_	
Net monthly income from a business, profession, or farm \$ 0 \$ here \$	<u> </u>
6. Net income from rental and other real property Gross receipts (before all deductions) Debtor 1 Debtor 2 \$	
Ordinary and necessary operating expenses -\$ Conv	
Net monthly income from rental or other real property \$ \$\$	<u> </u>
7. Interest, dividends, and royalties \$	<u> </u>

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Debtor 1 Irving Montalvo First Name Middle Name Last Name	····	Case number (if known)		and the second s
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8. Unemployment compensation		\$ 0	\$	
Do not enter the amount if you contend that the amount re				
under the Social Security Act. Instead, list it here:				
For your spouse				
· ·				
 Pension or retirement income. Do not include any amou benefit under the Social Security Act. 	unit received that was a	\$0	\$	
10. Income from all other sources not listed above. Specific Do not include any benefits received under the Social Secas a victim of a war crime, a crime against humanity, or interrorism. If necessary, list other sources on a separate page.	curity Act or payments reconternational or domestic			
food stamps		190 \$ 190	\$	
		0 \$	\$	
Total amounts from separate pages, if any.		+ s	+ \$	
11. Calculate your total current monthly income. Add lines column. Then add the total for Column A to the total for C	s 2 through 10 for each column B.	\$1648_	\$	Total current monthly income
Part 2: Determine Whether the Means Test App	lies to You			
12. Calculate your current monthly income for the year. F				
12a. Copy your total current monthly income from line 1	1	Co	py line 11 here	\$ 1648
Multiply by 12 (the number of months in a year).				x 12
12b. The result is your annual income for this part of the	form.		12b.	\$ <u>19776</u>
13. Calculate the median family income that applies to yo	ou. Follow these steps:			
Fill in the state in which you live.	NEW YORK			
Fill in the number of people in your household.	1		-	
Fill in the median family income for your state and size of	household		13.	\$ <u>52024</u>
To find a list of applicable median income amounts, go or instructions for this form. This list may also be available a	nline using the link specifie	d in the separate		
14. How do the lines compare?				
Line 12b is less than or equal to line 13. On the Go to Part 3.	top of page 1, check box 1	, There is no presumptio	n of abuse.	
Line 12b is more than line 13. On the top of pag	e 1, check box 2, The pres	sumption of abuse is dete	ermined by Form 122	4-2.
Part 3: Sign Below				
By signing here, I declare under penalty of perjur	y that the information on th	nis statement and in any	attachments is true a	nd correct.
* June Maly So	, ,			
Signature of Debtor		Signature of Debtor 2		
Date 3/20/19		Date MM / DD / YYYY	<u>.</u> Tagan	
If you checked line 14a, do NOT fill out or file	Form 122A-2.			
If you checked line 14b, fill out Form 122A-2	and file it with this form.			

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Fill in this	information to id	lentify your case:				
Debtor 1	Irving		Montalvo			
Deploi	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name			
United State	s Bankruptcy Court f	for the: SOUTHER District	of NEW YORK			
Case numbe (If known)	·					☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

1:	Give Details Abou	t Your Marital Stat	us and Where Yo	ou Lived Before		
'hat	is your current marital	status?				
	arried ot married					
1 N	g the last 3 years, have o es. List all of the places					
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				☐ Same as Debtor 1		☐ Same as Debto
	Number Street		From To	Number Street		From
	City	State ZIP Code	-	City	State ZIP Code	
t-cons		er kananasa asa di keleberan selaka di 2000 mengangan pengan pengan pada 420 di asah di Sebesah Sebesah Sebesa Sebesah selakan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan peng	gayday, ghan tanay na arang sa na kanada da	Same as Debtor 1	mention distribution of the contract of the co	Same as Debto
	Number Street		From To	Number Street		From
	City	State ZIP Code	- :	City	State ZIP Code	Community property
state A N	es and territories include	Arizona, California, Ida	ho, Louisiana, Neva	da, New Mexico, Puert	y property state or territory? (o Rico, Texas, Washington, and	I Wisconsin.)

Explain the Sources of Your Income

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Case number (if known)

Montalvo

Irving

Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive logether, list it only once under Debtor 1. No Yes. Fill in the details. Patient Pat	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Check all that apply. Wages, commissions, bonuses, tips Operating a business For last calendar year: (January 1 to December 31, \frac{Yr 2018}{YYYY} Wages, commissions, bonuses, tips Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royallies; and
From January 1 of current year until the date you filed for bankruptcy: To tast calendar year: (January 1 to December 31, \frac{Y \tau 2018}{Y \text{YYZ}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Operating a business}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Operating a business}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y Vages, commissions, bonuses, t	Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details.
From January 1 of current year until the date you filed for bankruptcy: To tast calendar year: (January 1 to December 31, \frac{Y \tau 2018}{Y \text{YYZ}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Operating a business}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Operating a business}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y \text{Vages, commissions, bonuses, tips}} \frac{Y \text{Vages, commissions, bonuses, tips}}{Y Vages, commissions, bonuses, t	Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Shibitr Sources of income Gross income Check all that apply Check all tha	If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of Income Check all that apply. Check all that apply. From January 1 of current year until the date you filled for bankruptcy: For last calendar year: (January 1 to December 31, Yr 2018 YYYY) For the calendar year before that: (January 1 to December 31, Yr 2017 YYYY) Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsults; royalties; and
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Canuary 1 to December 31, Yr 2018 Operating a business Opera	(January 1 to December 31, \(\frac{\text{Yr 2018}}{\text{YYY}}\) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
For the calendar year before that: (January 1 to December 31, Yr 2017 Operating a business T1101 Operating a business Operating	For the calendar year before that: (January 1 to December 31, \frac{\text{Yr 2017}}{\text{YYYY}}\) (January 1 to December 31, \frac{\text{Yr 2017}}{\text{YYYY}}\) (January 1 to December 31, \frac{\text{Yr 2017}}{\text{YYYY}}\) (Operating a business) (Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and
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Yes. Fill in the details. Debtor 1 Sources of Income Poscribe below. Gross Income From Each source (before deductions and exclusions) From January 1 of current year until	List each source and the gross income from each source separately. Do not include income that you listed in line 4.
Sources of income Describe below. Gross income from each source (before deductions and exclusions) From January 1 of current year until	I.A.I.No
Sources of Income Describe below. Gross Income from each source (before deductions and exclusions) Sources of Income Describe below. Gross Income from each source (before deductions and exclusions) Sources of Income Describe below. Sources of Income Describe below. Sources of Income Describe below. Sources of Income Poscribe below.	restauración de la constanción del constanción de la constanción d
Describe below. (before deductions and exclusions) Prom January 1 of current year until	Yes. Fill in the details.
Pescribe below. Compared to the property of	Yes. Fill in the details.
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	First Name Midd	lle Name Last Name					
	riist ivaine ivadu						
			V 2				
rt 3:	List Certain Pa	yments You Made I	Before You Filed f	or Bankruptcy			
4							
Are eith	ner Debtor 1's or	Debtor 2's debts prima	rily consumer debts	?			
	Noither Debter	1 nor Debtor 2 has prin	narily consumer deh	te. Consumer dehts ar	e defined in 11 U.S.	C. & 101(8) as	
110.	"incurred by an ir	ndividual primarily for a p	personal, family, or ho	usehold purpose."			
		ys before you filed for ba			\$6,425* or more?		
	No. Go to line	a 7.	•				
	total am child su	ow each creditor to whor nount you paid that credi pport and alimony. Also,	tor. Do not include pay , do not include payme	yments for domestic su ents to an attorney for t	ipport obligations, su this bankruptcy case	uch as	
	* Subject to adju	stment on 4/01/19 and e	every 3 years after tha	t for cases filed on or a	after the date of adjus	stment.	
Yes	Debtor 1 or Deb	otor 2 or both have prin	narily consumer deb	ts.			
103		ys before you filed for b			\$600 or more?		
			ankiupicy, did you pay	arry creation a total of	toos or more.		
	No. Go to lin	e 7.					
	Yes List held	ow each creditor to who	m you paid a total of \$	600 or more and the to	otal amount vou paid	that	
	creditor	. Do not include paymer	nts for domestic suppo	ort obligations, such as	child support and		
	alimony	. Also, do not include pa	ayments to an attorney	y for this bankruptcy ca	ise.		
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Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was *Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are	an insider?
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are	an insider?
corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securitie agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domesti	es; and any managing
such as child support and alimony.	o dapport obligations,
☑ No	
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Insider's Name	
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Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on accou an insider?	int of a debt that benefited
Include payments on debts guaranteed or cosigned by an insider.	
☑ No	
Yes. List all payments that benefited an insider.	
	n for this payment creditor's name
	The state of the s
Insider's Name	
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Case number (if known)

Montalvo

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	Identify Legal Ac					: .			
Within 1	1 year before you fil	ed for bankruptcy	, were you a	party in any law	suit, court action,	or adminis	trative proce	eding?	
List all s	such matters, includir	ng personal injury ca	ases, small c	laims actions, divo	orces, collection sui	its, paternity	actions, sup	port or cu	stody modificati
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r 1	Irving	Montalvo	·	Case number (if known)		
•	First Name	Middle Name Last Na	nme			
Vith	in 90 days hefo	re you filed for hankrun	tcv. did any creditor, includit	ng a bank or financial instituti	on, set off any an	ounts from your
CCC	ounts or refuse	to make a payment beca	use you owed a debt?			
Z						
	es. Fill in the de	etails.				
			Describe the action the credite		Date action	Amount
			Describe the action the create		was taken	
7	Creditor's Name		9-5. (1995)	<u> </u>	Jacobs Control of the	
						\$
1	lumber Street					
-			SOME AND THE STATE OF THE STATE			
7	City	State ZIP Code	Last 4 digits of account num	ber: XXXX-		
Vith	nin 1 vear before	e you filed for bankrupto	y, was any of your property	in the possession of an assig	nee for the benef	t of
			todian, or another official?			
3 1	No					
]	Yes					
5	List Certai	in Gifts and Contribut	tions			
	Gifts with a total	value of more than \$600	Describe the gifts		Dates you gave the gifts	Value
Ü	Lauren Lauren der Christian					
					page of the second	\$
. •	Person to Whom You	Gave the Gift				Ψ
					has showed distant	\$
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	Number Street				· .	
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	City	State ZIP Code			Operation with	
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	Person's relationsh	nip to you	о <mark>ни при при при при при при при при при пр</mark>			
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	Gifts with a total oper person	value of more than \$600	Describe the gifts		the gifts	
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	City	State ZIP Code			A CONTRACTOR OF THE CONTRACTOR	
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١.,	Irving	Montalvo		Case	number (if known)		
	First Name Middle N	ame Last N	iame				
14h.	n 2 voore hofore vou f	ilad for bonkrun	tcy, did you give any gift	e or contributions v	with a total valu	e of more than \$6	600 to any charity?
		iled for ballkrup	tcy, did you give any gire	s or contributions v	vicii a totai vaia	o or more than v	you to uny onumy.
N							
J Ye	es. Fill in the details for	each gift or contr	ribution.				
	Gifts or contributions to	charities	Describe what you contrib	outed a 441	世界芳 和	Date you	Value
	that total more than \$600				森林名 [基	contributed	
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N	umber Street		The second secon			and roomste	

Ci	ty State ZIP C	Code		***************************************	Alkany Market	J	
							
6:	List Certain Los	ses					
	Describe the property yo how the loss occurred	u lost and	Describe any insurance of include the amount that in claims on line 33 of Sched	surance has paid. List p	ending insurance	Date of your loss	Value of property lost
			claims on line 33 of 3ched	idle Arb. Froperty.	1125		
april de la constantion de la							\$
***************************************						-	
L	er i en regeneration en		OCH PROBLEM TO SELECTION OF THE SELECTIO				
7:							
			tcy, did you or anyone el		ehalf pay or tra	nsfer any proper	ty to anyone
ou o	consulted about seek	ing bankruptcy o	or preparing a bankruptc eparers, or credit counselir	y petition?	nes required in v	your bankruptcy	
		rupicy petition pre	sparers, or orean counsem	ig agencies for service	oco roquirou iir j	our burnauptoy.	
Z] N							
_ Y	es. Fill in the details.						
			Description and value of	f any property transfer	red	Date payment of transfer was	r Amount of payme
	Person Who Was Paid				1157/1	made made	
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	Number Street						\$

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			***************************************				*
	City S	state ZIP Code	***			A	
	Email or website address			19			
	Person Who Made the De	ant if Not You					
	Person Who Made the Payme	ent, if Not You	* 1				

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	Description and value of any property	transferred	Date payment or transfer was made	Amount of payment
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Person Who Was Paid				· ·
				Ψ
Number Street			Passacrania para man	s.
				<u> </u>
City State ZIP Code				
			and an analysis	
Email or website address			Militarian	
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Person Who Made the Payment, if Not You				
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Person Who Was Paid	The state of the s			
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Name of trust Date rentification Date rentifi										
Name of trust Date rentification Date rentifi	/ithir	n 10 years before yo	u filed for bankrup	tcy, did you tra	ansfer any prope	erty to a self-s	ettled trust	or similar de	vice of which	ch you
Date cription and value of this property transferred Date and transferred	re a	beneficiary? (These	are often called ass	et-protection de	evices.)					
Description and value of the grope by transferred Date transferred				•						
Date remote value of the property transferred Date remote vas.mede										
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Name of trust				r Heave	5 M 1 7 5 8 4			生 5 28		100
Name of trust Size List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Vithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, loosed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions. Name of Financial institution				Description an	d value of the pro	perty transferre		1,140		The Control of the Co
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			Employer Identification number
		Describe the nature of the business	Do not include Social Security number or ITIN.
	Business Name		EIN.
			EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
			From To
	City State ZIP Code		
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I Ir arring 18	nave read the answers on this Statements are true and correct. I understand connection with a bankruptcy case case U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Depton Date	nd that making a false statement, concealing propon result in fines up to \$250,000, or imprisonment for Signature of Debtor 2 Date Statement of Financial Affairs for Individuals Filing to be not an attorney to help you fill out bankruptcy	erty, or obtaining money or property by fraud or up to 20 years, or both. g for Bankruptcy (Official Form 107)?

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Fill in this in	ıformation to i	dentify your case:			
Debtor 1	Irving		Montalvo		
Debior	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		
United States	Bankruptcy Cour	t for the: SOUTHER District	ct of NEW YORK		
Case number (If known)		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `			☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

or any creditors that you listed in Part 1 of Schedule D: C formation below.	reditors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
dentify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	No
ame:	Retain the property and redeem it.	/es
escription of roperty ecuring debt:	Retain the property and enter into a Reaffirmation Agreement.	Euromorphia
ecuring dest.	Retain the property and [explain]:	
ceditor's ame:	Surrender the property.	No
Description of	Retain the property and redeem it.	Yes
roperty	Retain the property and enter into a Reaffirmation Agreement.	
ecuring debt:	Retain the property and [explain]:	
Creditor's	Surrender the property.	No
	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
ecuring debt:	Retain the property and [explain]:	
Creditor's		No
name:	Surrender the property.	
Description of property	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Yes
securing debt:	Retain the property and [explain]:	

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Debtor 1	Irving	Montalvo	Case number (if known)	
	Circl Manage	Middle Name		

r any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).		
Describe your unexpired personal property leases	Will the lease be assumed?	
Lessor's name:	□No	
Description of leased property:	Yes	
_essor's name:	□No	
Description of leased property:	□JYes	
Lessor's name:	□No	
Description of leased property:	Yes	
Lessor's name:	□No □ Yes	
Description of leased property:		
Lessor's name:	□\vo □\ves	
Description of leased property:	μωπτes	
Lessor's name:	No	
Description of leased property:	Yes	
Lessor's name:	<u> </u>	
Description of leased property:	Pes	
t 8: Sign Below		
nder penalty of perjury, I declare that I have indicated my in ersonal property that is subject to an unexpired lease.	ention about any property of my estate that secures a debt and any	
*		
Signature of Debtor 1 Signa	ture of Debtor 2	

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)
Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny

your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)
Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

UNITED STATES BANKRUPTCY COURT

	SOUTHERN Distri	ct OfNEW YORK
In re Montalvo, Irving		Case No.
Debtor		Chapter 7
		E TO CONSUMER DEBTOR(S) E BANKRUPTCY CODE
I, the [non-attorney] bankruptcy petinattached notice, as required by § 342(b) of the	tion preparer signing the	Bankruptcy Petition Preparer e debtor's petition, hereby certify that I delivered to the debtor the
Printed name and title, if any, of Bankruptcy Address:	Petition Preparer	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, o partner of the bankruptcy petition preparer.) (Require by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer or principal, responsible person, or partner whos Security number is provided above.		
	Certification	of the Debtor
	we) have received and re	ead the attached notice, as required by § 342(b) of the Bankruptcy
Code.		Signature of Debror Date 320
TRUING MOWAU Printed Name(s) of Debtor(s)	······································	Signature of Debtor Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court southern District Of NEW YORK

IN RE. Montalvo, Irving

Debtor(s).

Case No.

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of my/our knowledge and that it corresponds to the creditors listed in my/our schedules.

Date: 3/20/19

Joint Debtor

Capital One Bank Usa Na Po Box 30281 Salt Lake City UT 84130

Chase Card Po Box 15298 Wilmington DE 19850

Citicards Cbna Pob 6241 Sioux Falls SD 57117

Credit One Bank Po Box 98875 Las Vegas NV 89193

Discover Finacial Service Po Box 15316 Wilmington DE 19850

First Premier Bank 601 S Minnesota Ave Sioux Falls SD 57104

Fsb Blaze Credit Card 500 E 60th Street Sioux Falls SD 57104

Syncb/walmart Po Box 965024 Orlando FL 32896